

PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No: 28341/6127NDIV1

CONTINUING APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a request under 37 CFR 1.53 for filing a

- ☐ continuation application.
☒ divisional application.



1. Particulars of Prior Application

Application Serial No:	09/853,919
Filed on:	May 11, 2001
Title:	Vaccine Composition, Method of Preparaing Same, and Method of Vaccinating Vertebrates
Art Unit:	1644
Examiner:	David A. Saunders, Ph.D.
Prior Docket No.:	28341/6127N

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this Continued Prosecution Application Request Transmittal Under 37 CFR 1.53(d) and the documents referred to as enclosed therewith are being deposited with the United States Postal Service on **November 10, 2003**, in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, utilizing the "Express Mail Post Office to Addressee" service of the United States Postal Service under Mailing Label No. EV323776643US.

Laura Frasher

2. This request is filed by:

1. Full Name of Inventor	Family Name Bowersock	First Given Name Terry	Second Given Name L.
Residence & Citizenship	City Portage	State or Foreign Country Michigan	Country of Citizenship The United States of America
Post Office Address	Post Office Address 3160 Lost Pine Way	City Portage	State & Zip Code/Country Michigan, 49024
2. Full Name of Inventor	Family Name Guimond	First Given Name Paul	Second Given Name
Residence & Citizenship	City Kalamazoo	State or Foreign Country Michigan	Country of Citizenship The United States of America
Post Office Address	Post Office Address 3335 Fair Oaks Drive	City Kalamazoo	State & Zip Code/Country Michigan, 49008
3. Full Name of Inventor	Family Name Ju	First Given Name Tzu-Chi	Second Given Name R.
Residence & Citizenship	City Thousand Oaks	State or Foreign Country California	Country of Citizenship Taiwan
Post Office Address	Post Office Address 2033 Harrier Court	City Thousand Oaks	State & Zip Code/Country California, 91320
4. Full Name of Inventor	Family Name Kidane	First Given Name Argaw	Second Given Name
Residence & Citizenship	City Greensboro	State or Foreign Country North Carolina	Country of Citizenship Ethiopia
Post Office Address	Post Office Address 1144 Bridford Lake Circle, Apt. G	City Greensboro	State & Zip Code/Country North Carolina, 27047

3. **Amendments**

- ☐ Amend the specification by inserting before the first line the sentence:
- ☐ Cancel claims in the prior application before calculating the filing fee.
- ☒ A Preliminary Amendment is enclosed.
- ☒ The filing fee is based upon entry of the foregoing amendment(s) (if any).

4. **Copy of Prior Application**

The enclosed is a copy of the prior complete application, including the specification (with claims), drawings, the oath or declaration, and any amendments referred to in the oath or declaration filed to complete the prior application.

5. **Incorporation By Reference**

The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under paragraph 4, above, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. **Assignment**

- ☒ The prior application is assigned of record to Pharmacia & Upjohn Company, and has been recorded at Reel No. 11970, Frame No. 0787.

7. **Fee Calculation**

CLAIMS AS FILED - INCLUDING AMENDMENT(S) (IF ANY)						
			SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	NO. FILED	NO. EXTRA	RATE	FEE	RATE	FEE
BASIC FEE						\$750.00
TOTAL	69 - 20	= 49	X 9 =		X 18 =	\$882.00
INDEP.	2 - 3	= 0	X 42 =		X 84 =	
First Presentation of Multiple Dependent Claim			+ 140 =		+ 280 =	
Filing Fee:					OR	\$1632.00

8. Method of Payment of Fees

- ☒ Attached is a check in the amount of: \$1632.00
- ☐ Charge Deposit Account No. 13-2855 in the amount of:
A copy of this Transmittal is enclosed.

9. Deposit Account and Refund Authorization

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 37 CFR 1.17 to Deposit Account No. 13-2855. A copy of this Transmittal is enclosed.

Please refund any overpayment to Marshall, Gerstein & Borun LLP at the address below.

10. Correspondence Address

Customer No.: 04743

Respectfully submitted,

MARSHALL, GERSTEIN & BORUN LLP
6300 Sears Tower
233 South Wacker Drive
Chicago, Illinois 60606-6357
(312) 474-6300
(312) 474-0448 (Telefacsimile)

By: _____

Michael Muczynski
Reg. No: 48,642

November 10, 2003